

TELEPHONE (312) 258-5500

**SCHIFF HARDIN LLP**

PATENT DEPARTMENT

6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

CONFIRMATION NO.: 2642

GROUP ART UNIT: 2165

EXAMINER: Samuel G. RIMELL

In re application of: Dr. Jerzy Bala

Serial No.: 10/617,054

Filed: July 10, 2003

For: **"KNOWLEDGE INFERENCING AND DATA VISUALIZATION METHOD AND SYSTEM"**  
**AMENDMENT "B" AND Petition for Extension of Time Accompanying a Request for Continued Examination**  
**MAIL STOP RCE**

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA. 22313-1450

SIR:

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	18		20	0	( ) X 25.00 ( ) X 50.00	\$00
INDEP. CLAIMS	3	MINUS	3		( ) X 100.00 (X) X 200.00	\$00
Application amended to contain any multiple dependent claims not previously paid for.				( ) YES ( ) NO	( ) \$180.00 ( ) \$360.00 ONE TIME	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated \_\_\_\_\_ for \_\_\_\_\_ months so that the period for response is extended to \_\_\_\_\_. A check in the amount of \$ \_\_\_\_\_ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ is attached.

☐ A check for \$ \_\_\_\_\_ accompanying IDS under 37 CFR 1.97(c) is attached

☐ A check for \$ \_\_\_\_\_ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.

When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN LLP (Customer Number: 26574)

BY Melvin A. Robinson (31,870)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA. 22313-1450 on January 6, 2006.

Melvin A. Robinson

NAME OF APPLICANT'S ATTORNEY

SIGNATURE

January 6, 2006

DATE